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COMBINED DECLARATION AND POWER OF ATTORNÉ

Ac a ba	
ns a De	elow named inventor, I hereby declare that:
	TYPE OF DECLARATION
This de	claration is of the following type: (check one applicable item below)
23	original
О	design
	supplemental .
NOTE.	If the declaration is for an International Application being filed as a divisional, continuation of continuation-in-part application do not check next item; check appropriate one of last three items
0	national stage of PCT
	If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL CONTINUATION OR CIP.
	divisional
0	continuation
	continuation-in-part (CIP)
	INVENTORSHIP IDENTIFICATION
WARNING	G: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the fast claimed invention was made, should be submitted.
	Submitted.
believe I In origina	ence, post office address and citizenship are as stated below next to my name. I am the original, first and sole inventor (if only one name is listed below) or II, first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled:
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(Declaration and Power of Attorney [1-1]-page 1 of 5)

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information

which is material to patentability as defined in 37	Code of Federal Regulations
§ 1.56	-

(also check the following items, if desired)

- and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
 - ☐ In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) is no such applications have been filed.
- (e) a such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY C UNDER 37	
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		·	☐ YES	ио □
			☐ YES	но 🗆
			☐ YES	NO []
		·	O YES	NO 🗆

Suite 303

Cambridge, MA 02142

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefic of the prior U.S. or PCT application(s) under 35 U.S.C. § 120. POWER OF ATTORNEY I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Steven J. Weissburg Reg. No. 31,581 (check the following item, if applicable) Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from m representative(s). SEND CORRESPONDENCE TO DIRECT TELEPHONE CALLS TO (Name and telephone number) Steven J. Weissburg	ALL	FORE				THAN 12 MONTHS PPLICATION
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238 Main Street (617) 354-9343			•			

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor Thomas (CNEN NUME) Inventor's signature Post Office Address Full name of second joint inventor, if any Inventor's signature Inventor's signature Date X 12/17/93 Country of Citizenship Inventor's signature Country of Citizenship US Residence Salishury FAMILY OR LAST NUMB US Country of Citizenship US Country of Citizenship Inventor's signature US Country of Citizenship Inventor's signature Country of Citizenship	NOTE: Cadefully indicate documents.	the family (or last) name as it should appe	ar on the unity receipt and on a
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CHECK	PRU, ER BOX(ES) FOR ANY OF THE FOLLO. YG ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION
0	Signature for third and subsequent joint inventors. Number of pages added
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0	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added
0	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added
	Added pages to combined declaration and power of attorney for divisional continuation, or continuation-in-part (CIP) application
	□ Number of pages added
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	• • •
0	Authorization of attorney(s) to accept and follow instructions from representative

x This declaration ends with this page